



JONATHAN E. FIELDING, M.D., M.P.H.
Director and Health Officer

JOHN SCHUNHOFF, Ph.D.
Acting Chief Deputy

313 North Figueroa Street, Room 909
Los Angeles, California 90012
TEL (213) 240-8117 * FAX (213) 975-1273



BOARD OF SUPERVISORS

Gloria Molina
First District

Yvonne B. Burke
Second District

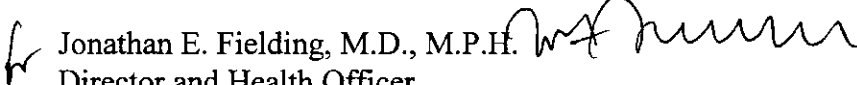
Zev Yaroslavsky
Third District

Don Knabe
Fourth District

Michael D. Antonovich
Fifth District

September 22, 2006

TO: Each Supervisor

FROM:  Jonathan E. Fielding, M.D., M.P.H.
Director and Health Officer

SUBJECT: **IMMUNIZATION PROGRAM STATE FUNDING
ALLOCATION FOR FY 2006-07**

This is to advise you that the Department of Public Health is exercising its delegated authority, approved by your Board on June 7, 2005 (attached), to accept and sign the Fiscal Year 2006-07 Standard Agreement (SA) Number 06-55181 from the California Department of Health Services in the amount of \$1,819,483 for the period of July 1, 2006 through June 30, 2007 to provide continued funding support for the Immunization Program.

The SA has been reviewed and approved as to form by County Counsel.

If you have any questions or require additional information, please let me know.

JEF:po

Attachment

c: Chief Administrative Officer
County Counsel
Executive Officer, Board of Supervisors



THOMAS L. GARTHWAITE, M.D.
Director and Chief Medical Officer

FRED LEAF
Chief Operating Officer

COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES
313 N. Figueroa, Los Angeles, CA 90012
(213) 240-8101

May 19, 2005

ADOPTED
BOARD OF SUPERVISORS
COUNTY OF LOS ANGELES

32

JUN 7 2005

Violet Varona-Lukens
VIOLET VARONA-LUKENS
EXECUTIVE OFFICER

BOARD OF SUPERVISORS

Gloria Molina
First District

Yvonne Brathwaite Burke
Second District

Zev Yaroslavsky
Third District

Don Knabe
Fourth District

Michael D. Antonovich
Fifth District

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, California 90012

Dear Supervisors:

**IMMUNIZATION PROGRAM STATE FUNDING ALLOCATION AND SUBCONTRACT
AGREEMENTS FOR FISCAL YEAR 2005-2006**
(All Districts) (3 Votes)

IT IS RECOMMENDED THAT YOUR BOARD:

1. Accept the attached Letter of Intent (LOI), Exhibit I, from the California Department of Health Services (CDHS), in the amount of \$1,057,050 for the period of July 1, 2005 through June 30, 2006 to provide continued funding support for the County's Immunization Program.
2. Approve and instruct the Director of Health Services, or his designee, to sign Amendment No. 3 to Agreement No. H-212985 with Northeast Valley Health Corporation, Inc. (NEVHC) for a total maximum County obligation of \$64,000, substantially similar to Exhibit II, for the Women, Infants, and Children (WIC) program for the provision of monthly voucher pickup, escort of children for needed immunizations, and/or co-location of immunization services for the period of July 1, 2005 through June 30, 2006, 100% offset by State funds, with provision for a 12-month automatic renewal, effective July 1, 2006 through June 30, 2007, contingent upon receipt and approval of CDHS funding for Fiscal Year (FY) 2006-07.
3. Approve and instruct the Director of Health Services, or his designee, to sign Amendment No. 3, substantially similar to Exhibit III, with the following 14 service providers: Arroyo Vista Family Health Center, Catalina Island Medical Center, (formerly known as Avalon Municipal Hospital and Clinic), Chinatown Service Center, Clinica Msr. Oscar A. Romero, East Los Angeles Health Task Force, Eisner Pediatric and Family Medical Center, El Proyecto del Barrio, Family Health Care Centers of Greater Los Angeles, Inc., Koryo Health Foundation,

Mission City Community Network, Inc., Northeast Valley Health Corporation, Franciscan Clinics D.B.A. QueensCare Family Clinics, Valley Community Clinic, and Venice Family Clinic, for enhanced immunization services, for the period of July 1, 2005 through June 30, 2006, for a total maximum County obligation of \$646,000, 100% offset by State funds, with provision for a 12-month automatic renewal, effective July 1, 2006 through June 30, 2007, contingent upon receipt and approval of CDHS funding for Fiscal Year (FY) 2006-07.

4. Approve and instruct the Director of Health Services, or his designee, to sign Amendment No. 1, substantially similar to Exhibit IV, with the following six service providers: AltaMed Health Services Corporation, Central City Community Healthcare Center, Harbor Free Clinic, Partners in Care Foundation Care-A-Van Mobile Health Clinic, St. John's Well Child and Family Center, and Westside Family Health Center for enhanced immunization services, for the period of July 1, 2005 through June 30, 2006, for a total maximum County obligation of \$243,000, 100% offset by State funds, with provision for a 12-month automatic renewal, effective July 1, 2006 through June 30, 2007, contingent upon receipt and approval of CDHS funding for Fiscal Year (FY) 2006-07.
5. Delegate authority to the Director of Health Services, or his designee, to accept and sign forthcoming Standard Agreements with the CDHS for FY 2006-07 and FY 2007-08, for the provision of immunization program services, subject to review and approval by County Counsel and notification of Board offices.

PURPOSE/JUSTIFICATION OF THE RECOMMENDED ACTION:

Board approval of the recommended actions will provide funding support to amend an existing Agreement with NEVHC for the immunization WIC project and to renew 20 immunization service agreements for the continued provision of enhanced immunization services for infants and small children countywide.

FISCAL IMPACT/FINANCING:

The total program cost for FY 2005-06 is \$1,057,050, fully offset by State funds. Funding allocations are as follows: 1) Amendment No. 3 for Agreement No. H-212985 with NEVHC is in the amount of \$64,000 for FY 2005-06, with a provision for a 12 month automatic renewal, contingent upon the receipt of CDHS funding for FY 2006-07; 2) Amendments No. 1 and 3 with 20 immunization service providers for enhanced immunization services totals \$889,000 for FY 2005-06, with provision for a 12 month automatic renewal, contingent upon the receipt of CDHS funding for FY 2006-07; and 3) A total of \$104,050 is allocated to the immunization program office for health education materials and contract monitoring fees. There are no net County costs.

Funding is included in the FY 2005-06 Proposed Budget.

FACTS AND PROVISIONAL/LEGAL REQUIREMENTS:

For a number of years, the Board has authorized the continuation of immunization services and/or activities and has approved agreements with community-based organizations supported by State funding.

On September 30, 2003 the Board approved Standard Agreement No. 03-75134 from the CDHS in the amount of \$1,318,800 for the period of July 1, 2003 through June 30, 2004. In the same action, the Board approved recommendations to amend two immunization service agreements for WIC and approved amendments for the renewal of 14 service providers and seven new immunization agreements for enhanced immunization services. The Board also delegated authority to the Director of Health Services, or his designee, to accept and sign forthcoming Standard Agreements with the CDHS for subsequent fiscal years for immunization services through FY 2005-06, subject to review and approval by County Counsel and notification of Board offices.

On August 9, 2004, the Department accepted Standard Agreement No. 04-35236 in the amount of \$1,312,45 from the CDHS for FY 2004-05 through delegated authority as authorized by the Board on September 30, 2003.

On February 14, 2005, the Department received a LOI from the CDHS in the amount of \$1,057,050 to support the continuation of immunization services for the WIC project and the renewal of 20 immunization service providers.

Board approval of the recommended actions will prevent a lapse of immunization services for Los Angeles County. The Department anticipates receiving the State Standard Agreement for FY 2005-06 by July 2005.

County Counsel has reviewed Exhibit I and approved Exhibits II and III as to form.

Attachments A and B provide additional information. Attachment C is the Grant Management Statement for grant awards exceeding \$100,000.

CONTRACTING PROCESS:

It is not appropriate to advertise subcontract amendments on the L.A. County Online Web Site as a business/contract opportunity. The 20 subcontract amendments for the provision of enhanced immunization services were selected by the CDHS through a Request for Application (RFA) solicitation process. DHS was provided a list of qualified contractors to enter into contractual agreements for immunization services. The providers of WIC services were not included in the State's RFA process.

The Department has been providing WIC services through an agreement with NEVHC since September 2001. NEVHC is one of three WIC service providers for Los Angeles County and is the only agency that provides WIC services for the Northeast and Santa Clarita Valley area.

The Honorable Board of Supervisors

May 19, 2005

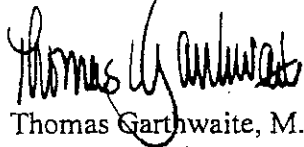
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IMPACT ON CURRENT SERVICES (OR PROJECTS):

Approval of Amendment No. 3 and the renewal of 20 subcontract amendment agreements will provide State funding support for the continuation of WIC and enhanced immunization program services for Los Angeles County throughout FY 2006-07.

When approved, this Department requires three signed copies of the Board's action.

Respectfully submitted,



Thomas Garthwaite, M.D., Director
Department of Health Services

TLG:kh

Attachment (4)

c: Chief Administrative Officer
County Counsel
Executive Officer, Board of Supervisors

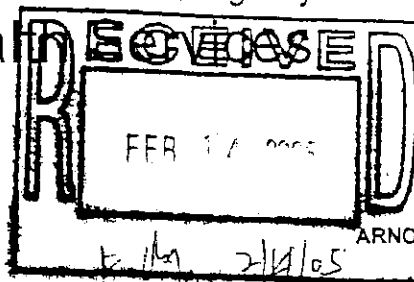
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State of California—Health and Human Services Agency

Department of Health Services



SANDRA SHEWRY
Director



ARNOLD SCHWARZENEGGER
Governor

February 7, 2005

Ms. Cheri Todoroff, M.P.H.
Director, Immunization Program
County of Los Angeles Department of Health Services
3530 Wilshire Blvd, Suite 700
Los Angeles, CA 90010

Dear Ms. Todoroff:

I am writing this letter in response to your request for information regarding available funding for Fiscal Year 2005-2006. The California Department of Health Services, Immunization Branch intends to award the Los Angeles County Department of Health Services \$1,057,050. These funds include \$150,000 for WIC, and \$907,050 for community health centers. These funds are to cover the period of July 1, 2005-June 30, 2006 and are contingent upon continued appropriations by the Governor and Legislature for FY 05/06.

I hope this letter will satisfy your Department of our intent to provide contract funds to continue immunization project efforts in Los Angeles County.

Thank you for your Department's continued efforts to improve infant and toddler immunization levels. If I can be of further assistance, please contact me at 510/540-2065.

Sincerely,

John L. Dunajski, MPA, Assistant Chief
Immunization Branch

cc: Maria Volk, CDHS, Immunization Branch
Leona O'Neill, CDHS, Immunization Branch
Mitch Mellman, Los Angeles County, Immunization Program

SUMMARY OF AGREEMENT1. TYPE OF SERVICES:

Provision of a comprehensive immunization services delivery program within Los Angeles County to assist in the prevention of the occurrence and transmission of vaccine-preventable diseases. Program services include enhanced immunization services, monthly voucher pickup, escort of children for needed immunizations and/or co-location of immunization services and referral and assessment.

2. AGENCY/CONTACT PERSON:

California Department of Health Services (CDHS)
Immunization Branch
2151 Berkeley Way, Room 712
Berkeley, California 94704
Attention: Denise Rogers, MPH, Assistant Chief, Immunization Branch
Telephone: (510) 540-2065 - Facsimile: (510) 839-6015
e-mail address: www.dhs.ca.gov

3. TERM OF CDHS LETTER OF INTENT:

Effective July 1, 2005 through June 30, 2006, contingent upon continued appropriation by the Governor and Legislature for Fiscal Year (FY) 2005-06.

4. FINANCIAL INFORMATION:

The total program cost for FY 2005-06 is \$1,057,050, fully offset by State funds. Funding allocations are as follows: 1) Amendment No. 3 for Agreement No. H-212985 with NEVHC is in the amount of \$64,000 for FY 2005-06, with a provision for a 12 month automatic renewal, contingent upon the receipt of CDHS funding for FY 2006-07; 2) Amendments No. 1 and 3 with 20 immunization service providers for enhanced immunization services totals \$889,000 for FY 2005-06, with a provision for a 12 month automatic renewal, contingent upon the receipt of CDHS funding for FY 2006-07 ; and 3) A total of \$104,050 is allocated to the immunization program office for health education materials and contract monitoring fees. There are no net County costs.

Funding is included in the FY 2005-06 Proposed Budget.

5. SUBCONTRACT SERVICES:

<u>Contract No.</u>	<u>Contractor</u>	<u>FY 2005-2006 Max. Obligation</u>
<u>WIC Subcontract Services:</u>		
H-212985-3	Northeast Valley Health Corporation, Inc. (NEVHC) - WIC 1172 North Maclay Avenue San Fernando, California 91340-1300 Attention: Kim Wyard, Executive Director Telephone: (818) 898-1399/Facsimile: (818) 365-7670	\$64,000

COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES PUBLIC HEALTH IMMUNIZATION PROGRAM BUDGET - FISCAL YEAR 2005-2006 COUNTY BUDGET JULY 1, 2005 through JUNE 30, 2006
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<u>PERSONNEL SERVICES</u>	<u>HRS/ FTE % TIME</u>	<u>MONTHLY SALARY</u>	<u>APPROVED BUDGET</u>
OPERATING EXPENSES			
Health Education Materials (Incentives & Media/Marketing)			86,000
TOTAL OPERATING EXPENSES			\$86,000
SUBCONTRACT EXPENSES			
WIC - Northeast Valley Health Corporation			64,000
CHC - AltaMed Health Services Corporation			85,000
CHC - Arroyo Vista Family Health Center			100,000
CHC - Catalina Island Medical Center			15,000
CHC - Central City Community Healthcare Center			20,000
CHC - Chinatown Service Center			10,000
CHC - Clinica Msr. Oscar A. Romero			27,000
CHC - East Los Angeles Health Task Force			10,000
CHC - Eisner Pediatric & Family Medical Center			100,000
CHC - El Proyecto Del Barrio, Inc.			100,000
CHC - Family Health Care Centers of Greater LA, Inc.			28,000
CHC - Harbor Free Clinic			10,000
CHC - Koryo Health Foundation Community Clinic			10,000
CHC - Mission City Community Network, Inc.			37,000
CHC - Northeast Valley Health Corporation			100,000
CHC - Partners in Care Foundation Care-A-Van Mobile Health C			37,000
CHC - QueensCare Family Clinics			55,000
CHC - St. John's Well Child & Family Center			72,000
CHC - Valley Community Clinic			10,000
CHC - Venice Family Clinic			44,000
CHC - Westside Family Health Center			19,000
TOTAL SUBCONTRACT EXPENSES			\$953,000
Other Costs - Contract Monitoring Fee			18,050
TOTAL GRANT COST			\$1,057,050
Indirect Cost	29.2934%		0
Total Program Cost			<u>\$1,057,050</u>

SUMMARY OF AGREEMENTS (cont'd)

<u>Contract No.</u>	<u>Contractor</u>	<u>FY 2005-2006 Max. Obligation</u>
<u>Community Health Center Subcontract Services</u>		
H-700136-1	AltaMed Health Services Corporation 500 Citadel Drive, Suite 490 Los Angeles, California 90040 Attention: Cristina Martinez Telephone: (323) 889-7325/Facsimile: (323) 889-7843	\$85,000
H-213067-3	Arroyo Vista Family Health Center 6000 North Figueroa Street Los Angeles, California 90042 Attention: Martina Ramirez, Ph.D. Telephone: (323) 254-5221/Facsimile: (323) 254-4618	\$100,000
H-212987-3	Catalina Island Medical Center 100 Falls Canyon Road, P.O. Box 1663 Avalon, California 90704 Attention: Krista Steuter, Clinic Manager Telephone: (310) 510-0700/Facsimile: (213) 680-9427	\$15,000
H-700137-1	Central City Community Healthcare Center 5970 South Central Avenue Los Angeles, California 90001 Attention: Genevieve Filmardirossian Telephone: (323) 724-6911/Facsimile: (323) 724-6915	\$20,000
H-213008-3	Chinatown Service Center 767 North Hill Street, Suite 400 Los Angeles, California 90012 Attention: Tina Young Telephone: (213) 880-1740/Facsimile: (213) 680-9427	\$10,000
H-212967-3	Clinica Msr. Oscar A. Romero 123 South Alvarado Street Los Angeles, California 90017 Attention: Melinda Serrano Telephone: (213) 201-2784/Facsimile: (213) 989-7701	\$27,000
H-213083-3	East Los Angeles Health Task Force 2120 East 6 th Street Los Angeles, California 90023 Attention: Susana Arellano Telephone: (323) 261-2171/Facsimile: (323) 261-0246	\$10,000

SUMMARY OF AGREEMENTS (cont'd)

<u>Contract No.</u>	<u>Contractor</u>	<u>FY 2005-2006 Max. Obligation</u>
H-213010-3	Eisner Pediatric and Family Medical Center 1530 South Olive Street Los Angeles, California 90016 Attention: Chona J. de Leon Telephone: (213) 746-1037/Facsimile: (213) 746-9379	\$100,000
H-212988-3	El Proyecto del Barrio 8902 Woodman Avenue Arleta, California 91331 Attention: Corrine Sanchez Telephone: (818) 830-7133/Facsimile: (818) 830-7280	\$100,000
H-213084-3	Family Health Care Centers of Greater Los Angeles, Inc. 6501 South Garfield Avenue Bell Gardens, California 90201 Attention: Raquel Villa, Executive Director Telephone: (562) 928-9600/Facsimile (562) 927-6974	\$28,000
H-700194-1	Harbor Free Clinic 599 West 9 th Street San Pedro, California 80731-3105 Attention: Michele Ruppel, Executive Director Telephone: (310) 547-0176/Facsimile: (310) 547-5096	\$10,000
H-212989-3	Koryo Health Foundation 1058 South Vermont Avenue Los Angeles, California 90006 Attention: Kyung Man Seo, Executive Director Telephone: (213) 380-8833/Facsimile: (213) 368-6047	\$10,000
H-212968-3	Mission City Community Network, Inc. 16206 Parthenia Street North Hills, California 91343 Attention: Laura Valenzuela Telephone: (818) 895-3100/Facsimile: (818) 893-9464	\$37,000
H-212984-3	Northeast Valley Health Corporation 1172 North Maclay Avenue San Fernando, California 91340-1300 Attention: Kim Wyard, Executive Director Telephone: (818) 898-1388/Facsimile: (818) 365-7670	\$100,000

SUMMARY OF AGREEMENTS (cont'd)

<u>Contract No.</u>	<u>Contractor</u>	<u>FY 2005-2006 Max. Obligation</u>
H-700112-1	Partners in Care Foundation Care-A-Van Mobile Health Clinic 101 South First Street, Suite 100 Burbank, California 91502 Attention: James A. Cook Telephone: (818) 526-1780 x108/Facsimile: (818) 526-1788	\$37,000
H-207612-3	Franciscan Clinics D.B.A. QueensCare Family Clinics 1300 North Vermont Avenue, Suite 102 Los Angeles, California 90027 Attention: Susan K. Fuentes, Vice President Telephone: (323) 644-6191/Facsimile: (323) 953-2757	\$55,000
H-700116-1	St. John's Well Child & Family Center 514 West Adams Boulevard Los Angeles, California 90007 Attention: James J. Mangia Telephone: (213) 749-0947/Facsimile: (213) 749-7354	\$72,000
H-212951-3	Valley Community Clinic 6902 Coldwater Canyon Avenue North Hollywood, California 91605 Attention: Diane Chamberlain Telephone: (818) 763-8836/Facsimile: (818) 7630-7231	\$10,000
H-213009-3	Venice Family Clinic 604 Rose Avenue Venice, California 90291 Attention: Christine Lund Telephone: (310) 664-7721/Facsimile: (310) 392-6642	\$44,000
H-700135-1	Westside Family Health Center 1711 Ocean Park Boulevard Santa Monica, California 90405 Attention: Debra Farmer Telephone: (310) 450-4773/Facsimile: (310) 450-0783	\$19,000

6. PRIMARY GEOGRAPHIC AREAS TO BE SERVED:

Countywide.

SUMMARY OF AGREEMENTS (cont'd)

7. DESIGNATED ACCOUNTABLE FOR PROJECT MONITORING:

Robert J. Kim-Farley, M.D., M.P.H., Director, Communicable Disease Control and Prevention

8.. APPROVALS:

Public Health:	John F. Schunhoff, Ph.D., Chief of Operations
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Contracts and Grants Division:	Cara O'Neill, Chief
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County Counsel (approval as to form)	Allison Morse, Deputy County Counsel
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COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES
 PUBLIC HEALTH
 IMMUNIZATION PROGRAM BUDGET - FISCAL YEAR 2005-2006
 COUNTY BUDGET
 JULY 1, 2005 through JUNE 30, 2006

<u>PERSONNEL SERVICES</u>	<u>FTE</u>	<u>HRS/ % TIME</u>	<u>MONTHLY SALARY</u>	<u>APPROVED BUDGET</u>
OPERATING EXPENSES				
Health Education Materials (Incentives & Media/Marketing)				86,000
TOTAL OPERATING EXPENSES				<u>\$86,000</u>
SUBCONTRACT EXPENSES				
WIC - Northeast Valley Health Corporation				64,000
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CHC - Arroyo Vista Family Health Center				100,000
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CHC - Central City Community Healthcare Center				20,000
CHC - Chinatown Service Center				10,000
CHC - Clinica Msr. Oscar A. Romero				27,000
CHC - East Los Angeles Health Task Force				10,000
CHC - Eisner Pediatric & Family Medical Center				100,000
CHC - El Proyecto Del Barrio, Inc.				100,000
CHC - Family Health Care Centers of Greater LA, Inc.				28,000
CHC - Harbor Free Clinic				10,000
CHC - Koryo Health Foundation Community Clinic				10,000
CHC - Mission City Community Network, Inc.				37,000
CHC - Northeast Valley Health Corporation				100,000
CHC - Partners in Care Foundation Care-A-Van Mobile Health Clinic				37,000
CHC - QueensCare Family Clinics				55,000
CHC - St. John's Well Child & Family Center				72,000
CHC - Valley Community Clinic				10,000
CHC - Venice Family Clinic				44,000
CHC - Westside Family Health Center				19,000
TOTAL SUBCONTRACT EXPENSES				<u>\$953,000</u>
Other Costs - Contract Monitoring Fee				18,050
TOTAL GRANT COST				\$1,057,050
Indirect Cost		29.2934%		0
Total Program Cost				<u><u>\$1,057,050</u></u>

**Los Angeles County Chief Administrative Office
Grant Management Statement for Grants Exceeding \$100,000**

Department: Health Services

Grant Project Title and Description - Immunization Program Services

A comprehensive immunization services delivery program to assist in the prevention of the occurrence and transmission of vaccine-preventable diseases. Services include enhanced immunization services, monthly voucher pick-up, escort of children for immunizations and co/location of immunization services.

Funding Agency	Program (Fed. Grant #/State Bill or Code #)	Grant Acceptance Deadline
CDHS	Letter of Intent from the CDHS Dated 2/07/05	ASAP

Total Amount of Grant	\$1,057,050	County Match Requirements	N/A
Grant Period: 7/01/05	Begin	One year period	End Date: 6/30/05
Number of Personnel Hired -Grant	0	Full	0 Part Time

Obligations Imposed on the County When the Grant Expires

Will all personnel hired for this program be informed this is a grant funded program? Yes X No

Will all personnel hired for this program be placed on temporary ("N") items? X No

Is the County obligated to continue this program after the grant expires Yes No X

If the County is not obligated to continue this program after the grant expires, the Department will:

a). Absorb the program cost without reducing other services Yes No X

b). Identify other revenue sources Yes No X

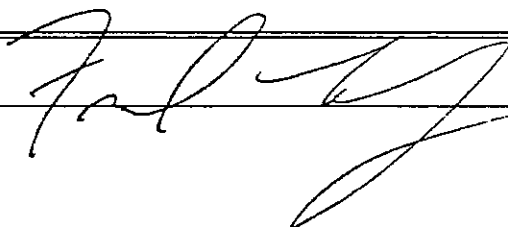
Describe

c). Eliminate or reduce, as appropriate, positions/program costs funded by this grant. Yes X No

Impact of additional personnel on existing space: None

Other requirements not mentioned above:
None

Department Head Signatu



Date